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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818.))		Docket Number (Optional) 21058/0206773-US0		
Application Number	10/748,389-Conf. #8159	Filed December 29, 2003		
For MICROFLUID MOLECULAR-FLOW FRACTIONATOR AND BIOPROCESSOR WITH INTEGRATED ACTIVE/PASSIVE DIFFUSION BARRIER				
Art Unit	1797	Examiner P. K. Wright		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$130	Small Entity Fee \$ 65	\$ 130.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$490	Small Entity Fee \$ 245	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1110	Small Entity Fee \$ 555	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1730	Small Entity Fee \$ 865	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2350	Small Entity Fee \$ 1175	\$ _____
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u>.</p>				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the <input type="checkbox"/> applicant/inventor.				
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>45,403</u>				
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>_____</u>				
<u>/Martin Sulsky/</u> Signature		<u>January 9, 2009</u> Date		
<u>Martin Sulsky</u> Typed or printed name		<u>(212) 527-7700</u> Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
<input type="checkbox"/> Total of <u>1</u> forms are submitted.				